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*Keywords:* neoliberalism, human development indices, citizen welfare, healthcare, Nigeria.

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# Neoliberal Reforms, Healthcare and other Human Development Challenges in Nigeria

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**Abstract-** Since the adoption of the neoliberal policy in Nigeria in the 1980s, its impact on the human development indices of the citizenry has not been satisfactory as manifested by the unequal income distribution gap between the rich and the poor over the years. Besides, the health conditions of Nigerians have experienced a decline as revealed by the increasing rate of child/infant mortality and maternal mortality which expresses the failure of government reforms in adequately addressing some aspects of the United Nations Millennium Development Goals (MDGs). Using secondary sources of data, this paper investigated how government's implementation of the neoliberal policies had impacted on the healthcare and human development indices of the citizens. It was observed that rather than improve the healthcare situation and human development indices of citizens, the Bretton Woods-authored reforms have rather narrowed opportunities for healthcare and human development in Nigeria. To improve the declining human development indices of citizens, the paper recommends the roll out of a politics of paradise to rein in the poverty and deprivation suffered by many Nigerians and the need for a human-faced approach to economic reforms, among others. The paper concludes that government must revisit the neoliberal reforms package in the country and stamp out the use of ad hoc and discretionary handouts and market-led growth which have failed to engender a trickle-down effect on the social realities of Nigerians. Citizen welfare and comfort must guide government's actions and intentions and should remain the benchmark for assessing the impact of any form of economic or social reforms that it desires to implement in the country.

**Keywords:** neoliberalism, human development indices, citizen welfare, healthcare, Nigeria.

## I. INTRODUCTION

Since the late 1980s, African countries have been experiencing crises of governance, democratic change and development. In a continent hitherto bedeviled by authoritarian rule and problems of dependent capitalism, Western donors through the activities of the Bretton Woods institutions such as the World Bank and IMF have sought to foist on African nations "neoliberal" interpretation of the state, civil society and development with far-reaching implications. In a world of plenty, so many people live in poverty and misery particularly in developing countries with serious consequences on their quality of life particularly the

state and condition of their health status. While development is a complex phenomenon, its ultimate success requires long-term thinking and planning with regard to promoting robust growth marked with affordable better healthcare, accessible qualitative education and less inequality (Stiglitz, 2007:15). Since the essence of economics is choice, it presupposes that there are alternatives, some of which benefit some groups (such as foreign capitalists) at the expense of others, some of which impose risks on some groups (such as workers, the poor and the vulnerable persons of society particularly women and children) to the advantage of others. And when there are alternatives and choices, democratic processes should be at the centre of decision-making which takes into serious cognizance the issues of social justice, income inequalities, poverty and human deprivation amongst others when socioeconomic policies of government are being adopted and implemented. Thus, the one-size-fits-all perspective to finding solutions to the challenges of development in developing countries does not seem to capture these complexities.

Socioeconomic development and success requires finding the right balance between the government and the market. This reality raises questions which include: What services should government provide? Should there be welfare programs? Should government encourage particular sectors with incentives? What regulations, if any, should government adopt to protect workers, consumers, the environment and the well-being of the ordinary citizens? This balance does obviously change over time and differs from country to country. The degree to which countries are concerned about the issues of inequality and poverty as well as the enormous costs of not dealing with the problem: the social consequences, including alienation, violence and social conflict associated with it goes to tell a lot about whom to entrust with key aspects of economic decision making and policies which reflect their political interests and cultural values and the impact it may ultimately have on the people's quality of life.

The introduction of the neoliberal economic order in Nigeria in the 1980s came as a fallout of the drop in government revenue following the shortfall in crude oil prices in the international global market leading to government's imprudent huge foreign borrowing from the World Bank, IMF and other international economic

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institutions to finance its huge budget deficits. This decision ultimately laid the foundation for the country's massive debt crisis with severe consequences for the entire economy which eventually led to conditions of massive unemployment, fall in industrial capacity utilization and drop in social service provision particularly in the health and education sectors. To mitigate the economic crisis, various austerity and stabilization measures were adopted by the government between 1982 and 1985 without much improvement given the continued decline in the quality of life of the people. By 1986, the Babangida regime adopted the World Bank/IMF inspired neoliberal policy of Structural Adjustment Programme (SAP). This policy gave primacy to free market enterprise, trade liberalization and economic deregulation, minimalist government involvement in the economy through streamlining government bureaucracies, privatization of the state by divesting public investment and participation in commerce, and the reduction of public expenditure for essential social services with little emphasis on income distribution objectives, equity, social justice, poverty reduction and restoration of full employment (Ajayi, 2005: 204; Karlinger, 1997:2; Stiglitz, 2007). The SAP principal's objective was to restore equilibrium in the balance of payments, control inflation and to realign overall domestic expenditure and production patterns through expenditure switching measures designed to reduce the level of aggregate demand (Haque, 1999; World Bank, 1983).

The supposed goal of the neoliberal policy was to bring new prosperity by enhancing economic growth and reduction of poverty, but instead it brought about a drop in income and living standards of many poor people in developing countries through pushing for conservative economic policies that gave primacy to market fundamentalism such as free trade, unfettered flow of speculative capital, privatization of social security and the failure to strike a balance between the role of government and the market. Underlying the neoliberal approach was its conservative appeal to Adam Smith's invisible hand which had the notion that markets and the pursuit of self interest would lead, as if by an invisible hand, to economic efficiency while ignoring the issue of inequitable distribution of income, non-economic values such as social justice, the environment, cultural diversity, universal access to healthcare and consumer protection (King, 1987). In the same vein, the neoliberal assumptions pay little or no considerations to domestic factors such as the dependent and peripheral nature of developing economies particularly sub-Saharan Africa where capitalist development has not significantly flourished. Likewise, the neoliberal policy also failed to recognize that without appropriate government regulation and intervention, markets do not lead to economic efficiency (Greenwald & Stiglitz, 1986; Haque, 1996b; Walton & Seddon, 1994). Instead, it focused on

advancing corporate interests at the expense of the well-being of ordinary citizens.

With more than three decades into the implementation of neoliberal economic reforms in Nigeria, available demographic statistics reveal that the neoliberal policy has not brought about the massive improvement in the social welfare needs of the populace coupled with failing to adequately address many thorny issues of poverty, massive corruption, social inequality, unemployment, poor healthcare and sanitation, uneven income distribution and infrastructural decay which have impacted the poor inordinately (Egharevba & Chiazor, 2013; UNCTAD, 2008; World Bank, 2009). For instance, the Nigerian Bureau of Statistics (NBS) (2013) showed that more than 70% of persons in Nigeria live below the poverty line of US\$ 1 dollar per day (specifically 112 million out of 170 million live in relative poverty) from 27% in 1980 and 54% in 2006, infant and child mortality rate is one of the highest in world (75 and 88 per 1,000 live births), under five mortality is 157 per 1,000 live birth; maternal mortality increased from 545 to 630 deaths per 100,000 live births; electricity consumption is 50 percent, access to improved water is 56 percent, improved toilet facilities is 27 percent and 23% unemployment rate (NDHS, 2008, 2013). According to the cited reports, the gap between the rich and the poor in terms of income inequality (moved from 0.429 in 2004 to 0.447 in 2010) and also continues to widen, in spite of its huge natural and material resources, including the projection that the economy is growing at 7.7 percent annually.

These data showed that a more people-centered approach to development still remains a serious dilemma in Nigeria which paints a gory picture of the people's quality of life as clearly manifested in the nation's low Human Development ranking by the UNDP since the 1990s. This statistics clearly show the negligence of the Nigerian government in investing on health, education, water and sanitation and nutritional needs of the populace. Since independence, the Nigerian government has hardly spent beyond 5% and 13% budgetary allocations on health and education which goes to show the level of its obligation to meeting the social welfare of its people (Abayomi, 2012). Thus the poor ranking of Nigeria in the annual Human Development Index since the 1990s reveal the society's level of development and the performance of the healthcare delivery system given the high incidence of maternal, infant/child mortality and under-five deaths in the country which raises the critical question of the country's capacity to attain the MDGs target. It is the need to address these concerns, therefore, that motivated this study. This is critically so because the country has been experiencing a trend of increasing levels of poverty in the midst of so-called economic prosperity as showed by the economic growth rate. There is, therefore, the real risk that if the country continues to be unable to translate its apparent high

economic growth rate into poverty reduction, the expectations from the MDGs can quickly unravel. This is expedient since the core essence of development as conceived by scholars and development institutions is one that places much emphasis on education, health, social inclusion and empowerment of the people, and berates countries with high levels of income but poor health and educational standards which is tantamount to growth without development (Sen, 1999; William, 2003).

## II. HUMAN DEVELOPMENT AND NEOLIBERALISM IN NIGERIA

In 2014, Nigeria rebased its GDP from 1990 to 2010 and became the largest economy in Africa with an estimated nominal GDP of USD 510 billion, surpassing South Africa's USD 352 billion. Nigeria has maintained its impressive growth over the past decade with an estimated 7.4% growth of real Gross Domestic Product (GDP) in 2013, up from 6.5% in 2012 (UNDP, 2014). In spite of this feat, the country still faces the challenge of making its decade-long sustained growth more inclusive as the benefits of economic growth have not sufficiently trickled down to the poor and vulnerable groups in the country. Poverty, unemployment, uneven income distribution between the rich and the poor and social inequality still remain prominent among the major challenges facing the economy. The country continues to be hampered by an infrastructural deficit, especially in the areas of energy supply and transportation, and underinvestment in human capital. Nigeria's ranking according to the Human Development Index 2012 has not improved markedly over the last two decades. With 0.471, Nigeria's score is below the 0.475 average for sub-Saharan Africa.

The country's efforts to achieve the Millennium Development Goals have however yielded some marginal results despite the nation's huge resource endowment. For instance, the infant mortality rate reduced from 126 to 78 per 1000 live births in 1990 and 2012 respectively, and its maternal mortality rate from 1100 to 630 per 100,000 live births in the same period. The proportion of deliveries with skilled attendants rose from 38.9% in 2008 to 53.6% in 2012. The government's implementation of its Universal Basic Education Programme introduced in 1999 has led to an increased enrolment in primary schools. While enrolment is important, the rate of completion is of sensitive concern and somewhat worrisome. According to UNESCO's Education for All Monitoring Report 2012, Nigeria has an estimated 10.5 million children still out of school and 26% of those enrolled do not complete the primary cycle. Nevertheless, 72.1% of the population falling within the ages of 15 to 24 years is literate while funding to the education sector remains abysmally low. The share of education in the budget fell from 12.2% in 1985

to 8.5% in 2013, 17.5% points lower than the UNESCO-recommended share of 26%. This contradicts the position of the World Bank African Competitiveness Report (2013) which observed that education remains one of the most powerful instruments for reducing poverty and inequality, including laying the foundation for sustained economic growth. Although the Gini coefficient improved from 0.488 in 2010 to 0.397 in 2011, there is still a broad gap between the rich and the poor, owing, amongst others, to differential access to infrastructure and amenities. The burgeoning size of the poor and its attendant social ills require that serious attention be focused on the group. As such, there is the need to interrogate the link between neoliberalism and development.

Development entails a condition in which people can meet their basic needs for existence and live an improved quality of life. Here people must be seen to be the agent, means and ends of development- that is their interest and well-being should be the measure of all things which represent the supreme law of development. Generally, development can be viewed from political, economic and social dimensions. Accordingly, Sen (1999:3) provides a useful theoretical and empirical formulation of development "as an integrated process of expansion of substantive freedoms that connect with one another". He identified five distinctive types of freedom, seen in an instrumental perspective as "(1) political freedoms, (2) economic facilities, (3) social opportunities, (4) transparency guarantees and (5) protective security; concluding that, freedoms are not the primary ends of development, they are also among its principal means." He further opines that focusing on human freedoms contrasts with narrower views of development, such as identifying development with the growth of Gross National Product (GNP), or with the rise in personal incomes, or with industrialization or with technological advancement, or with social modernization. While growth of the GNP or of individual incomes can, of course, be very important in expanding the freedoms enjoyed by members of the society, freedom depends on other determinants such as social and economic arrangements (for example, facilities for education and healthcare as well accessibility to them) and political and civil rights (which includes the liberty to participate in public discussion and scrutiny) (Sen, 1999). For Sen, therefore, development encapsulates human well-being. Human well-being also means to be well in the basic sense of being healthy, well nourished or highly literate and more broadly having freedom of choice in what one can become and can do (Imhonopi, Urim & Igbadumhe, 2013).

In the same vein, development can also be seen as the sustained elevation of an entire society and social system toward a better or more humane life. What constitutes the good life is a question as old as

philosophy and humankind; one that must be periodically re-evaluated and answered afresh in the changing environment of the world society. Be that as it may, scholars agree with Goulet and others that at least three basic components or core values should serve as a conceptual basis and the practical guidelines for understanding the inner meaning of development (Goulet, 1971). These core values include: sustenance (it represents the ability to meet basic life-sustaining needs which include food, shelter, health and protection), self-esteem (the ability to be a person, creating sense of worth and self-respect) and freedom from servitude (the ability to choose which includes an expanded range of choices for societies and their members together with a minimization of external constraints in the pursuit of some social goal called development). The concept of human freedom should also encompass various components of political freedom including, but not limited to, personal freedom, the rule of law, freedom of expression, political participation and equality of opportunity (UNDP, 1992; Wall Street Journal, 1997). These three core goals of development represent the fundamental human needs and common goals sought by all individuals and societies (Goulet, 1971).

Therefore, development is about the improvement in the quality of life of people and economic development is a necessary condition for the attainment of this goal. As such, rising per capita incomes, the elimination of absolute poverty, greater employment opportunities, and lessening income inequalities therefore constitute the necessary but not the sufficient conditions of development (Sen, 1983). In all, development can be seen as both a physical reality and a state of mind in which society through some combination of social, economic and institutional processes secure the means for obtaining a better life. Relying on the cerebral work of Todaro and Smith (2003, p.23), whatever the specific components of this better life, development in all societies must have at least the following three objectives:

- (i) to increase the availability and widen the distribution of basic life-sustaining goods; (ii) raise the levels of living, including in addition to higher incomes, the provision of more jobs, better education and greater attention to cultural and human values to enhance material well-being and (iii) generate greater individual and national self-esteem, and to expand the range of economic and social choices available to individuals and nations by freeing them from servitude and dependence not only in relation to other people and nation states but also to the forces of ignorance and human misery.

In the context of this discourse, development can be driven through conscious, consistent, progressive and enduring policies of government.

Government's socioeconomic policy thus goes a long way in determining the extent to which the share of a country's resources that is invested in education, healthcare, infrastructure and sanitation. In other words, government's socioeconomic policy measures how economic growth could translate into social development. Thus, when a country's social indicators are higher than its per capita income, it may suggest a strong government commitment to health, education and economic equity, while a reversal indicates government's failure to translate adequately its available economic resources into an improved quality of life (Handelman, 2006:4). Thus the measures of quality of life point to the general well-being of individuals and societies which refer to the degree to which a person enjoys the important possibilities in his or her life. Standard indicators of the quality of life include not only wealth and employment but also a built environment, physical and mental health, education, recreation and leisure time and social belonging. It goes beyond standard of living which is based primarily on income. Indicators of quality of life include concepts such as freedom, human rights, and happiness. In the modern world, the commonly used international measure of development is the Human Development Index (HDI) which combines measures of life expectancy, education and standard of living (income) in order to quantify the options available to individuals within a society.

### III. NEOLIBERALISM AND SOCIAL WELFARE

With regards to the concept of neoliberalism as a global economic order, contemporary scholars continue to pay much attention to studying various aspects of globalization phenomenon, including its origins. Although explanations which favor factors such as the growth of international trade or technological developments still remain popular, there is the growing recognition that globalization has a complex multi-causal nature with sociopolitical set of factors possibly playing more important roles than many believe (Quiggin, 1999). One popular view of globalization stresses the role of policy choices associated with a broad program of neoliberal reforms. This explanation implies that globalization must be perceived as the international manifestation of the general shift towards market-oriented neoliberalism. The new tendency has brought about the growth of unregulated international capital markets, which occurs in parallel with "... the shift to free-market domestic policies such as privatization, capital market deregulation and the abandonment of Keynesian macroeconomic management" (Quiggin, 1999, 248). The term neoliberalism is comprised of two notions, namely, "neo" meaning new and "liberal" meaning free from government intervention. Liberalism stems from the work of Adam Smith who, in the mid 1770s, advocated for a

minimal role of government in economic matters so that trade can flourish. The mindset of liberal economics held sway for almost 200 years and was temporarily replaced in the 1930s by Keynesian economics which saw a place for government intervention. In the 1970s, liberalism, or the cry for deregulation, privatization and the deletion of government intervention in the market economy, resurfaced with vengeance; hence the name neoliberalism.

Neoliberalism which is also known as economic liberalism or economic rationalism provides reason to limit government in relation to the market (Eleanor, 2007; Gordon, 1991). This paradigm rests on the "... beliefs in the efficacy of the free market and the adoption of policies that prioritize deregulation, foreign debt reduction, privatization of the public sector... and a new orthodoxy of individual responsibility and the emergency safety net- thus replacing collective provision through a more residualist welfare state (Hancock, 1999). Neoliberalism seeks its own ways to integrate self conduct of the governed into the practices of their government and through the promotion of correspondingly appropriate techniques of self. It constructs ways in which individuals are required to assume the status of being the subject of their own lives - the entrepreneurial self. Neoliberal philosophy has been used as a critique of the state in an attempt to legitimate the minimization of the state in terms of its restructuring through corporatization and privatization. The neoliberal thought relies on:

... a progressive enlargement of the territory of the theory by a series of redefinitions of its object, starting out from the neo-classical formula that economics concerns the study of all behaviours involving the allocation of scarce resources to alternative ends... economics becomes an approach capable of explaining all human behaviour (Gordon, 1991:43)

Paradoxically, under neoliberalism, many western nations have been reformed through government intervention. The neoliberal explanation for the impetus for state sector reform locates it in the need to improve a nation's competitiveness by increasing the efficiency of all sectors of the economy. Through neoliberal philosophy, the regulatory environment is designed to facilitate the development of the market that has paradoxically been established through state intervention. The ideology of neoliberalism has resulted in the notion that the state lacks efficiency while private markets are more cost effective and consumer-friendly. It emphasizes the role of unregulated markets and a minimal welfare state with government being seriously limited in its attempts to intervene or mitigate the negative effects of market forces on education and social welfare.

Consequently, the essence of neoliberal healthcare reformation is cost cutting and setting

healthcare up as a private good for sale rather than a public good paid for with the nation's resources. Neoliberal philosophy is these days illustrated by terminologies such as spending cuts, dismantling, deficit cutting, downsizing, declining welfare state, competitiveness, inefficiencies, inevitability, use-pay fees, for-profit healthcare, escalating costs, free markets and erosion of healthcare. Neoliberalism from its emergence in the 1970s and spread in the 1980s has been perceived as a radical challenge to the philosophy underpinning the welfare state. Production and distribution of goods through the free market does not distinguish between ordinary consumer goods and public goods such as healthcare and education. Concepts such as welfare state, social justice are condemned as inefficient and unjust within the neoliberal paradigm. Under the neoliberal approach, citizens are viewed primarily as rational consumers of public goods with healthcare being one of these goods. In other words, this philosophy places emphasis on the individual and mutual responsibilities rather than on rights and therefore fails to distinguish between the roles of people as consumers and citizens.

This approach to social policy formulation is evidenced by the term consumer which conjures up notion of using up and absorbing available resources. It seriously reflects the preoccupation of neoliberalism with consumerism and the acquisition of goods; and neglect addressing society's caring role for citizens. In addition, neoliberalism fails to distinguish the differing interests amongst social groups, especially in relation to power. Therefore, the neoliberal ideology can be seen to give only a partial view of society and serves to legitimate and justify the status quo. However, consumerist policies have a particular impact on those who do not have adequate access to material goods. The increasing disparities in wealth and income have forced many researchers to rethink the role of social class as a primary determinant of health. Thus, social and economic circumstances have been associated with inequalities in health, education, income levels and others for many decades. Socioeconomic status strongly influences people's physical and mental health, educational levels, quality of life, degree of healthcare access and mortality rates. Within countries, these inequalities can be seen throughout the whole social spectrum, suggesting there is not simply a threshold of absolute deprivation below which people suffer these inequalities, but also a linear relationship between socioeconomic circumstances and the general social welfare of individuals.

However, in examining the relationship between neoliberalism, specifically economic liberalism and the attainment of human development in the global south, with respect to advancing the quality of life of the people, reducing poverty, unemployment and inequality, questions have been raised about the unevenness of

the global economic order of neoliberalism generating both winners and losers in spite of the pace with which global integration of countries have increased over the past three decades. Critics of the neoliberal policy have conceived of the process as an exploitative phenomenon that sharpens inequality within and between states, increase poverty and attack the social welfare capacity of states (Cox, 1998:452). This is fundamentally so, given the rise in the incidence of poverty, unemployment and inequality and the high social and human costs with which free market reforms have been carried out to the detriment of the majority of the populace. With more than two decades into the implementation of the economic reforms in Nigeria, the country is still encumbered with the growing incidence of massive inequality between the rich and the poor, uneven income distribution, massive corruption, human deprivation, weak infrastructure and poor human development indicators. This is why over the last two decades Nigeria has consistently occupied the low ranking position in the UNDP Human Development Index reports. Also, budgetary allocation in the key sectors such as education and healthcare has never gone beyond 13% and 5%. Unemployment rate has skyrocketed to 23% in 2011 while health indicators in the area of child/infant mortality, under-five mortality and maternal mortality remain one of the highest in the world. The country now is far from realizing the development targets enunciated in the Millennium Development Goals (MDGs) which emphasized the goal of countries delivering human rights-based development.

While many developed nations particularly those with influence over the global political economy have gained as openness has grown, the benefits of neoliberal economic globalization have not been evenly spread as free market enterprise has been associated with growing unequalization between the rich and poor countries, and in many cases, resulted in exacerbating the incidence of global poverty particularly in the global south which includes Nigeria. A major feature of this process is the growing concentration and monopolization of economic resources and power by transnational corporations and the privatization of social security which ultimately undermines citizen's welfare conditions (Cox, 1998:452). Consequently, most developing countries like Nigeria over the years have seen their independent policy making capacity in the areas of economic, social, political, cultural and technological issues eroded and have had to implement policies that are in line with the decisions and rules of international financial institutions such as the World Bank/IMF which are detrimental to the country and the well-being of citizens.

#### IV. THE STATE OF HEALTHCARE CHALLENGES IN NIGERIA

'Health is wealth' goes the popular saying and therefore in every country, the health sector is critical to social and economic development with ample evidence linking productivity to quality of healthcare. The legitimacy of any national health system depends on how best it serves the interest of the poorest and most vulnerable people, for which improvements in their health status is vital to the realization of poverty reduction objective. In Nigeria, the vision of becoming one of the leading 20 economies of the world by the year 2020 is closely tied to the development of its human capital through the health sector (Osotimehin, 2009). However, health indicators in Nigeria have remained below targets and internationally-set benchmarks including the MDGs, which have recorded slow progress over the years. This poses a major development challenge which will impede development and economic growth. This is essential since access to quality healthcare and prevention services are critical tools essential for poverty reduction and economic growth which in turn impact on the quality of life of the people.

In the light of this, a look at the health status indicators for Nigeria showed that it is among the worst in the world. The life expectancy at birth is 52 years; vaccine-preventable diseases and infectious and parasitic diseases continue to exact their toll on the health and survival of Nigerians, becoming the leading causes of morbidity and mortality. As at 2008, the Federal Ministry of Health indicated that Nigeria has the highest number of HIV infected persons on the African continent and the fourth highest tuberculosis (TB) burden in the world. Also, non-communicable diseases are increasingly becoming public health problems, especially among the affluent urban population. Even though only 2% of the global population is in Nigeria, the country, with an estimated infant mortality rate of 75 per 1000 live births, child mortality rate of 88 per 1000 live births, under-five mortality of 157 per 1000 live births and a maternal mortality of 820 per 100,000 live births in 2008; 630 in 2012, contributes a disproportionate 10% to the global burden of maternal and also infant mortality (National Population Commission, 2008; Federal Ministry of Health, 2008; African Economic Outlook, 2014). Wide regional variations exist in infant and maternal mortality across the geopolitical zones in Nigeria. Infant and child mortality in the North West and North East zones of the country are in general twice the rate in the southern zones while the maternal mortality in the North West and North East is 6 times and 9 times the rate of 165/100,000 live births recorded in the South West zone respectively (Federal Ministry of Health, 2004). The table below shows the veracity of the current health indices in Nigeria:

Table 1 : Nigeria Health Indices

S/No.	Index	Nigeria's Figures	Ranking Among Countries
1	Access to sanitation	33%	115 <sup>th</sup> of 129
2	Birth rate, crude per 1000 people	40.51	20 <sup>th</sup> of 195
3	Children underweight rate	11%	14 <sup>th</sup> of 95
4	Contraception	15%	77 <sup>th</sup> of 89
5	Dependency ratio per 100	90	20 <sup>th</sup> of 166
6	Drug access	1%	141 <sup>st</sup> of 163
7	Expenditure per capital	\$23	155 <sup>th</sup> of 186
8	Hospital beds/1000 people	1.67%	98 <sup>th</sup> of 149
9	Infant mortality rate	70.49%	33 <sup>rd</sup> of 149
10	Life expectancy at birth	43.83yrs	170 <sup>th</sup> of 194
11	Probability of reaching 65 years	42.1%	126 of 159
12	Total expenditure on health	4.7%	135 of 185 as % of GDP
13	Water availability	2,514 cubic (mtrs)	115 of 165

Source: World Bank Development indicator database 2012.

In all of this, challenges still permeate the nation's health system making the rich and educated access better healthcare services rather than poorly educated and poverty stricken individuals that need it most. This has continued to bedevil the legitimacy of the country's health system and remains the most critical factor impeding the country's capacity towards achieving the health Millennium Development Goals (MDGs) by 2015. According to the UNDP, the Nigeria Human development Report 2008-2009, Nigeria seems to have a systemic structure that is challenged because the supposed economic growth especially after the country's return to democracy has not cascaded to many Nigerian citizens who are mainly peasant rural workers and artisans. This situation means that the opportunities for upward mobility seem limited which eventually could affect majority of the citizens' access to health services given their low income and poor purchasing power.

## V. NEOLIBERALISM AND CHALLENGES OF HUMAN DEVELOPMENT IN NIGERIA

There are obvious challenges that have arisen from the disquiet created by a badly implemented neoliberal economy policy in Nigeria. These challenges have been listed as follows:

First, while government over the years has tried to implement neoliberal reforms in the country with the goal to improve on the socioeconomic experiences of citizens, it seems that no deliberate effort is made to improve the living and working conditions of Nigerians and this has resulted in human development crises such as bad or poor health of citizens, poor sanitation, poor education and social services, housing problems, high child and maternal mortality, unemployment, poverty and poor infrastructural development. These factors have contributed immensely to the rural-urban migration syndrome in the country.

Second, neoliberalism with its emphasis on individualism, market ethos, commercialism, privatization and other Bretton Wood institutionalized economic principles have succeeded in pushing the poor and vulnerable groups in the Nigeria to the precipice of greater deprivation and neglect. This state of precarity has worsened over the years, making it difficult to discern the effect of the purported economic buoyancy on the quality of life of the citizens (Edewor, Imhonopi & Urin, 2014; Imhonopi, et al, 2013).

Third, neoliberalism in Nigeria as well as in Africa was designed without a human face and human heart. Rather than equilibrate the distribution of resources, it has successfully but subtly located access to the national treasury in the hands of a minority in government or coteries close to those in governance, thus risking investment in infrastructure, security, education and health of Nigerians. Consequently, the human development indices of Nigerians have parachuted.

Fourth, neoliberalism in its best form may not be able to deliver in an atmosphere where there is endemicity of corruption. As Bardhan (1990) and Evans (1995) put it, Nigeria seems to be a victim of predatory governance because of a culture which supports the appropriation of unearned income via rent-seeking and the endemicity of corruption which enriches a few and pauperizes the majority. Within such a milieu, economic, industrial and human developments are rolled backwards and majority of the citizens become worse off for it.

Lastly, the self-seeking political system and politicking in place in Nigeria are at variance with popular interests and desires. Borrowing the words of Standing (2011) and Imhonopi and Urin (2014), the lack of a politics of paradise and humanity that fails to promote inclusiveness and support the principles of economic security and social well-being has continued



to push majority of the population towards an impending apocalypse brewing in the horizon.

Thus, the human development of Nigerians has dipped because of both a poorly implemented neoliberal reform package and a warped political system that disenfranchises the majority for the perpetuation of the interests of a plutonomic coterie.

## VI. RECOMMENDATIONS AND CONCLUSION

To improve on the declining human development indices of Nigerians, the following points must guide Nigerian policy managers and implementers.

First, it is imperative that Nigeria should be committed to the evolution of democratic principles that advocate and perpetuate constitutionalism, accountability of those in governance, electoral politics that enthrone the wishes of the people and a platform where popular choice of leaders is respected. When the neoliberal paradigm is implemented within a context of respect for democratic ethos and popular democracy, government will be more disposed towards citizen engagement and participation in all reform processes.

Second, a politics of paradise needs to be rolled out to foster the declining human development indices of a majority of the country's population whose livelihood and experiences have known nothing but deprivation, pauperization and marginalization. With social and political inclusiveness and a bouquet of social and economic safety nets meant to cushion the experiences of the poor, the unemployed, the marginalized and largely the vulnerable population, these citizens will be mainstreamed into the centre of the socioeconomic space.

Third, a human-faced approach to economic reforms must be given a priority lest an army of vulnerable precariat emerges with a sense of bilious revenge which could pull at the seams of social and political integration.

Fourth, there is need to tackle corruption on all fronts by empowering anti-corruption agencies of government and allowing for judicial independence in the prosecution of corrupt government officials. The impunity shown by corrupt political and economic managers of the state in the pillage of the commonwealth which could have been invested in projects with the potential to advance the people's human development conditions must be stopped forthwith. When punitive measures are meted out on convicted individuals caught in the act of corruption, it may go a long way in dissuading others with such criminal tendencies.

Fifth, transformational leadership has become imperative if the human development condition of Nigerians is to improve. Nigeria needs a corps of political and economic leaders who leads by example. It

needs leaders who are willing to make sacrifices for the collective good, not political barracudas whose activities in governance mortgage the future and potentials of the country.

Lastly, there is need for the aggressive investment in infrastructural development and the improvement of the living conditions of Nigerians. When the health sector is revamped and access to healthcare by all citizens improves; when the educational system is reinvigorated; when security of lives and property is guaranteed; when essential services and social amenities are improved upon and modernized and when the justice system is speedy, becomes fair and firm, then the human development conditions of citizens might receive a new lease of life.

In conclusion, human development conditions of Nigerian citizens have continued to plummet in Nigeria and the situation has resulted in the poor state of healthcare and human development of citizens. The government must revisit its approach to the Bretton Woods-authored neoliberal reform package in the country by stamping out the use of ad hoc and discretionary handouts and market-led growth which have failed to engender a trickledown effect and alleviate or eradicate poverty and other social conundrums facing Nigerians. Thus, government needs to entrench the culture of democratic praxis in the political sphere, unfurl a politics of paradise with the aim to widen inclusiveness of the people and to foster social and economic safety nets for citizens. Government also needs to institute a human-faced approach to economic reforms, tackle the incidences of corruption and the culture that promotes it, enthrone transformational leadership and aggressively invest in the turnaround of infrastructural development and improvement of the living conditions of citizens.

Government must put paid to its usual rhetoric and political shenanigans and be committed to greater citizen engagement and participation in the governance processes of the state. Also, citizen welfare and comfort must guide government's actions and intentions and should remain the benchmark for assessing the impact of any form of economic or social reforms that it desires to implement in the country.

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